

## COMMENTS ON THE ILLINOIS ESSENTIAL HEALTH BENEFITS BENCHMARK OPTIONS

September 19, 2012

On behalf of the March of Dimes, we appreciate the opportunity to submit written comments about the possible Essential Health Benefits benchmark plans for the state of Illinois.

The mission of the March of Dimes is to improve the health of women of childbearing age, infants, and children by preventing birth defects, premature birth, and infant mortality. It has been a long-standing March of Dimes position that every woman of childbearing age, infant, and child should have access to comprehensive, affordable health insurance. Health insurance coverage affects how people use health care services. The Institute of Medicine (IOM) found that health insurance plays a key role in access to maternity care for pregnant women and that health insurance status is the most important factor in determining whether a child receives health services when they are needed. Therefore, the benefits and services that will be included in Illinois' Essential Health Benefits package will be of great concern to consumers.

### **Maternity Care**

In order to ensure the best possible outcomes for mothers and their newborns, the benchmark plan selected should cover all of the maternity benefits corresponding to the American College of Obstetricians and Gynecologists (ACOG) and the American Academy of Pediatrics' (AAP) *Guidelines for Perinatal Care*. These benefits include, but are not limited to: preconception care, prenatal care, labor and delivery, and postpartum care.

Of the ten possible benchmark plans, all seem to offer the various components of maternity care listed, but the comparison of the plans provided does not include sufficient detail to discern the quality of coverage. In particular, we are concerned about maternity coverage for dependents and ask if all plans cover it?

### **Pediatric Care**

For pediatric care, the March of Dimes recommends that all services specified in the *Scope of Benefits Policy Statement* issued by the AAP be included. In terms of dental care, none of the plans provide adequate coverage; none provide major dental services, and only the GEHA Plan Standard and BCBS Plan Standard offer limited basic dental services. The three federal plans offer diagnostic and preventative dental services, but this is also inadequate for pediatric care. For hearing, the United Healthcare Choice Plus Plan appears to be the best option, and for vision, the HA HMO and HMO IL state plans followed by the Blue Advantage Entrepreneur.

In cases where the benchmark plan does not cover pediatric oral or vision services, any supplemental plan used to "add on" these services must adequately address the clinical and developmental needs of children.

## **Habilitative Services**

Habilitative services are important to the March of Dimes as they cover early intervention services critical for the healthy development of premature infants and other children with special health care needs. Habilitative services should include maintenance of functions, in addition to attainment and improvement of skills and functions. In the long term, the achievement of functional milestones through habilitation can lead to far greater function later in life, reducing potentially significant long-term health care costs for children with special health care needs.

All services that meet the criteria under the National Association of Insurance Commissioners (NAIC) and Medicaid's definition of habilitative services should be covered in the Essential Health Benefits benchmark plan. Further, habilitative services should be covered at parity with rehabilitative services. The services and devices used in habilitation are often the same or similar as those in rehabilitation, as are the professionals who provide these services. Habilitative services should be covered whenever rehabilitative services would be covered: when services and devices are necessary to address a functional deficit regardless of the date of onset of the condition that caused that functional deficit.

While all of the plans except for the federal plans appear to be generous with habilitative benefits, the definition of habilitative services presented in all the plans is different from what the March of Dimes is seeking. Habilitative services should not only maintain function, but also enhance it for pediatric populations.

## **Medical Foods**

Coverage of medical foods is very important to certain individuals with special health care needs. For instance, there is no cure for children with phenylketonuria (PKU), but these children can be treated effectively with a special diet that must be started within the first six weeks of life. For infants, the diet consists of a special formula that is free of phenylalanine. Later, formula is supplemented with a diet that is low in phenylalanine. The cost of this dietary regimen can be substantial, upwards of \$10,000 per child per year. March of Dimes initially urged the IOM panel to include coverage of medical foods in the federal essential health benefits package to ensure that children with rare conditions such as PKU could quickly access medically appropriate care.

Of concern to the March of Dimes is that the chart indicates that the three state plans do not cover inborn metabolic foods.

## **Conclusion**

As you make your final decisions for the selection of the state's Essential Health Benefits benchmark plan, please keep in mind that in order to provide the most cost-effective care for women of childbearing age, infants, and children, the benchmark plan should cover all of the maternity and pediatric benefits corresponding to ACOG and AAP's *Guidelines for Perinatal Care* and AAP's *Scope of Benefits Policy Statement*. The March of Dimes recommends the state choose the United Healthcare Choice Plan because it cover state mandates, especially those for maternity care, medical foods and habilitative services. In addition, CHIP supplemental services are needed to supplement vision, dental, and hearing, since the plan not adequate.

Thank you for your attention and consideration of our recommendations. If you have additional questions, please contact Shelly Musser, Associate State Director Programs, Advocacy, and Government Affairs for the March of Dimes, Illinois Chapter at 217-303-8877 or [smusser@marchofdimes.com](mailto:smusser@marchofdimes.com).